Danville Architectural Heritage Board Member Application Form

Name			
Address			
City	State	ZIP	
Phone number(s) (H)		(W)	
(C)	Preferred number		
E-mail			
Have you served on an Archit	ectural Heritage Boa	ard before?	
If so, when and where?			
Have you served on a City Bo Zoning Adjustment, etc.)			
What kind of experience woul			
Describe any preservation ex	perience or interest	you have	
Describe any type of commun	nity involvement you	have had.	
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I understand that the DAHB meets at 2 p.m. on the third Wednesday of the month and also carries a requirement of one training session a year.

Please attach your resume or curriculum vitae and additional pages as needed.

CITY OF DANVILLE, ATTN: CITY CLERK P.O. Box 670, Danville, KY 40423 859-238-1200 Fax 859-936-1302